

# REQUEST FOR DISPOSITION OR WAIVER

For use of this form, see TB 43-0140, the proponent agency is U. S. Army DARCOM.

1. <input type="checkbox"/> DISPOSITION <input type="checkbox"/> WAIVER				
2. LOCATION OF EQUIPMENT			3. DATE (Submission)	
			4. DOCUMENT NO. (Depot Only)	
5. EQUIPMENT NOMENCLATURE				
a. YEAR MFGR.	b. HOURS/MILES	c. NSN	d. MAKE	e. MODEL
f. SERIAL NO.			g. REGISTRATION NO.	
6. ENGINE MAKE		a. ENGINE MODEL	b. ENGINE SERIAL NO.	
7. MAINT. EXPENDITURE LIMITS (MEL) TB DATE:			MAX. ALLOWABLE PERCENTAGE %	
8. ATTACHMENTS - (INTENSIVE MANAGED ITEMS/AUTOMATIC RETURN ITEMS)				
a. NSN	b. ITEM DESCRIPTION	c. MAKE	d. MODEL	e. SERIAL NO.
9. ESTIMATED REPAIR COSTS (See attached DA Form 2404)		10. REMARKS		
PARTS & MATERIALS				
LABOR COSTS MHRS. X\$				
TRANSPORTATION (NICP)				
MISSING ITEMS				
TOTAL COST				
ACQUISITION COST				
REPAIR COST PERCENT %				
11. TYPED NAME, ORG. & SIGNATURE OF INSPECTOR		14. CONDITION CODE	15. DISPOSITION OF WAIVER INSTRUCTIONS	
12. TYPED NAME & SIGNATURE OF NMP REP.				
13. TYPED NAME & SIGNATURE OF NICP REP.				